

<i>SERFF Tracking Number:</i>	<i>LMUG-125476782</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Liberty Insurance Corporation, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>LWCR-CW-017-08</i>		
<i>TOI:</i>	<i>16.0 Workers Compensation</i>	<i>Sub-TOI:</i>	<i>16.0004 Standard WC</i>
<i>Product Name:</i>	<i>Workers Compensation</i>		
<i>Project Name/Number:</i>	<i>Adoption of Item P-1405 &amp; Item B-1405 - Terrorism Risk Insurance Program Reauthorization Act of 2007 /LWCR-CW-017-08</i>		

## Filing at a Glance

Companies: Liberty Insurance Corporation, Liberty Mutual Fire Insurance Company, Liberty Mutual Insurance Company, LM Insurance Corporation, The First Liberty Insurance Corporation

Product Name: Workers Compensation	SERFF Tr Num: LMUG-125476782	State: Arkansas
TOI: 16.0 Workers Compensation	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 16.0004 Standard WC	Co Tr Num: LWCR-CW-017-08	State Status: Fees verified and received
Filing Type: Rule	Co Status:	Reviewer(s): Betty Montesi, Carol Stiffler, Brittany Yielding
	Author: Anne Aschbrenner	Disposition Date: 02/11/2008
	Date Submitted: 02/06/2008	Disposition Status: Approved
Effective Date Requested (New): 01/01/2008		Effective Date (New): 01/01/2008
Effective Date Requested (Renewal): 01/01/2008		Effective Date (Renewal):
State Filing Description:		

## General Information

Project Name: Adoption of Item P-1405 & Item B-1405 - Terrorism Risk Insurance Program Reauthorization Act of 2007		Status of Filing in Domicile: Not Filed
Project Number: LWCR-CW-017-08	Domicile Status Comments:	
Reference Organization: NCCI	Reference Number:	
Reference Title: Item B-1405 --Terrorism Risk Insurance Act of 2007 and Item P-1405--Terrorism Risk Insurance Program Reauthorization Act of 2007 Endorsements	Advisory Org. Circular: CIF-2007-09 & CIF-2007-10	
Filing Status Changed: 02/11/2008		
State Status Changed: 02/11/2008	Deemer Date:	
Corresponding Filing Tracking Number:		
Filing Description:		
RE: Workers Compensation Rule Filing		

PROJECT #LWCR-CW-017-08

SERFF Tracking Number: LMUG-125476782 State: Arkansas  
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TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
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Liberty Mutual Insurance Company NAIC-0111-23043

Liberty Mutual Fire Insurance Company NAIC-0111-23035

LM Insurance Corporation NAIC-0111-33600

The First Liberty Insurance Corporation NAIC-0111-33588

Liberty Insurance Corporation NAIC-0111-42404

The captioned companies file to adopt by reference the information provided in CIF-2007-09 - NCCI Countrywide Item B-1405--Terrorism Risk Insurance Act of 2007 and CIF-2007-10 - NCCI Countrywide Item P-1405--Terrorism Risk Insurance Program Reauthorization Act of 2007 Endorsements.

We are requesting an effective date of December 26, 2007.

We look forward to your approval/acknowledgement of this filing submission.

Anne Aschbrenner  
State Filings Analyst  
Liberty Mutual Group  
PO BOX 8070  
WAUSAU WI 54402-8070  
1-877-792-8728, Ext. 7052  
Fax: 1-715-842-6828  
Anne.Aschbrenner@wausau.com

## Company and Contact

### Filing Contact Information

Anne Aschbrenner, State Filings Analyst anne.aschbrenner@wausau.com  
PO Box 8070 (877) 792-8728 [Phone]  
Wausau, WI 54402-8070 (715) 842-6828[FAX]

### Filing Company Information

Liberty Insurance Corporation CoCode: 42404 State of Domicile: Illinois

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PO BOX 8070 Wausau, WI 54402-8070 (877) 792-8728 ext. [Phone]	Group Code: 111 Group Name: FEIN Number: 03-0316876 -----	Company Type: State ID Number:
Liberty Mutual Fire Insurance Company PO Box 8070 Wausau, WI 54402-8070 (877) 792-8728 ext. [Phone]	CoCode: 23035 Group Code: 111 Group Name: FEIN Number: 04-1924000 -----	State of Domicile: Wisconsin Company Type: State ID Number:
Liberty Mutual Insurance Company PO Box 8070 Wausau, WI 54402-8070 (877) 792-8728 ext. [Phone]	CoCode: 23043 Group Code: 111 Group Name: FEIN Number: 04-1543470 -----	State of Domicile: Massachusetts Company Type: State ID Number:
LM Insurance Corporation PO Box 8070 Wausau, WI 54402-8070 (877) 792-8728 ext. [Phone]	CoCode: 33600 Group Code: 111 Group Name: FEIN Number: 04-3058504 -----	State of Domicile: Iowa Company Type: State ID Number:
The First Liberty Insurance Corporation PO Box 8070 Wausau, WI 54402-8070 (877) 792-8728 ext. [Phone]	CoCode: 33588 Group Code: 111 Group Name: FEIN Number: 04-3058503 -----	State of Domicile: Iowa Company Type: State ID Number:

SERFF Tracking Number: LMUG-125476782 State: Arkansas

First Filing Company: Liberty Insurance Corporation, ... State Tracking Number: EFT \$25

Company Tracking Number: LWCR-CW-017-08

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: Adoption of Item P-1405 & Item B-1405 - Terrorism Risk Insurance Program Reauthorization Act of 2007 /LWCR-CW-017-08

## Filing Fees

Fee Required? Yes

Fee Amount: \$25.00

Retaliatory? No

Fee Explanation: \$25 for Item B-1405 filing.

Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Liberty Insurance Corporation	\$25.00	02/06/2008	17854081
Liberty Mutual Fire Insurance Company	\$0.00	02/06/2008	
Liberty Mutual Insurance Company	\$0.00	02/06/2008	
LM Insurance Corporation	\$0.00	02/06/2008	
The First Liberty Insurance Corporation	\$0.00	02/06/2008	

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Product Name: Workers Compensation

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	02/11/2008	02/11/2008

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Requesting an Effective Date of December 26, 2007	Note To Reviewer	Anne Aschbrenner	02/08/2008	02/08/2008
Amending Effective Date in Filing Description	Note To Reviewer	Anne Aschbrenner	02/07/2008	02/07/2008

SERFF Tracking Number:	LMUG-125476782	State:	Arkansas
First Filing Company:	Liberty Insurance Corporation, ...	State Tracking Number:	EFT \$25
Company Tracking Number:	LWCR-CW-017-08		
TOI:	16.0 Workers Compensation	Sub-TOI:	16.0004 Standard WC
Product Name:	Workers Compensation		
Project Name/Number:	Adoption of Item P-1405 & Item B-1405 - Terrorism Risk Insurance Program Reauthorization Act of 2007 /LWCR-CW-017-08		

## Disposition

Disposition Date: 02/11/2008

Effective Date (New): 01/01/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty	Approved	Yes
<b>Supporting Document</b>	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	Yes
<b>Supporting Document</b>	NAIC loss cost data entry document	Approved	Yes

*SERFF Tracking Number:* LMUG-125476782 *State:* Arkansas  
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*TOI:* 16.0 Workers Compensation *Sub-TOI:* 16.0004 Standard WC  
*Product Name:* Workers Compensation  
*Project Name/Number:* Adoption of Item P-1405 & Item B-1405 - Terrorism Risk Insurance Program Reauthorization Act of 2007 /LWCR-CW-017-08

**Note To Reviewer**

**Created By:**

Anne Aschbrenner on 02/08/2008 08:03 AM

**Subject:**

Requesting an Effective Date of December 26, 2007

**Comments:**

Please disregard our Note to Reviewer dated February 7, 2008.

We are requesting an effective date of December 26, 2007. This date is in compliance with TRIPRA and consistent with guidelines set forth by the Department of Treasury.

I apologize for any confusion this may have caused.

Thank you.



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*Company Tracking Number:*      *LWCR-CW-017-08*  
*TOI:*      *16.0 Workers Compensation*      *Sub-TOI:*      *16.0004 Standard WC*  
*Product Name:*      *Workers Compensation*  
*Project Name/Number:*      *Adoption of Item P-1405 & Item B-1405 - Terrorism Risk Insurance Program Reauthorization Act of 2007 /LWCR-CW-017-08*

**Note To Reviewer**

**Created By:**

Anne Aschbrenner on 02/07/2008 07:23 AM

**Subject:**

Amending Effective Date in Filing Description

**Comments:**

The requested effective date shown in the Filing Description should read January 1, 2008 in lieu of December 26, 2007.

Thank you.

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## Rate Information

Rate data does NOT apply to filing.

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## Supporting Document Schedules

		Review Status:	
<b>Bypassed -Name:</b>	Uniform Transmittal Document-Property & Casualty	Approved	02/11/2008
<b>Bypass Reason:</b>	Not applicable.		
<b>Comments:</b>			
<b>Bypassed -Name:</b>	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	02/11/2008
<b>Bypass Reason:</b>	Not applicable.		
<b>Comments:</b>			
<b>Bypassed -Name:</b>	NAIC loss cost data entry document	Approved	02/11/2008
<b>Bypass Reason:</b>	Not applicable.		
<b>Comments:</b>			